



#23

UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: N Aoyama
Serial No.: 09/376,651
Filed: August 18, 1999
TITLE: FEED ASSISTANCE MEMBER AND A MEDIUM PROCESSING APPARATUS

Examiner: Cone, D
Group Art Unit: 2854
Docket No.: JA998073

REQUEST FOR CHANGE OF CORRESPONDENCE

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

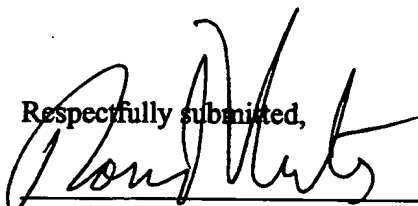
I, the attorney of record, request a change of the Correspondence Address for the above identified application to:

Randall J. Bluestone
International Business Machines Corporation
Intellectual Property Law
5600 Cottle Road
San Jose, California 95193

If you have any questions concerning this change of Correspondence Address, please contact David Victor at (310) 553-7977.

Respectfully submitted,

Dated: March 8, 2002



David W. Victor
Reg. No. : 39,867

I hereby certify that this correspondence is being hand delivered to the United States Postal Service in an envelope addressed:
Assistant Commissioner for Patents, Washington, D.C. 20231, on _____

Date

PART B - FEE(S) TRANSMITTAL

OK to Enter *pyB*

Complete and mail this form, together with applicable fee(s), to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

24033 7590 01/02/2002

KONRAD RAYNES VICTOR & MANN
315 SOUTH BEVERLY DRIVE
SUITE 210
BEVERLY HILLS, CA 90212

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/376,651	08/18/1999	NOBORU AOYAMA	JA9-98-073	6743

TITLE OF INVENTION: FEED ASSISTANCE MEMBER AND A MEDIUM PROCESSING APPARATUS

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
36	nonprovisional	NO	\$1280	\$300	\$1580	04/02/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
CONE, DARIUS N	2854	400-634000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. DAVID W. VICTOR

2. KONRAD RAYNES VICTOR & MANN

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

INTERNATIONAL BUSINESS MACHINES CORPORATION

ARMONK, NEW YORK

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☐ Issue Fee
☐ Publication Fee
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0263 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

3-8-02

DAVID W. VICTOR, REG. NO. 739,867

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

03/28/2002 MFAHAE11 00000026 500563 09376651

01 FC:142
02 FC:1951280.00 CH
300.00 CH

TRANSMIT THIS FORM WITH FEE(S)